

## DETECTION OF CHRONIC ENDOMETRITIS AT FLUID HYSTEROSCOPY

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**Objective:** Chronic endometritis is a subtle condition that is difficult to detect; however, it may cause abnormal uterine bleeding and infertility. Few data exist about the appearance of chronic endometritis at fluid hysteroscopy and about the value of diagnostic fluid hysteroscopy in the detection of this condition. In our experience, at fluid hysteroscopy chronic endometritis is characterized by consistent association of stromal edema and either focal or diffuse hyperemia; in some cases, this finding is associated with endometrial micropolyps (less than 1 mm in size).

**Materials and methods:** Nine hundred-ten women in whom hysteroscopy was indicated. Fluid hysteroscopy followed by endometrial biopsy.

**Results:** Sensitivity, specificity, positive and negative predictive values, and accuracy of fluid hysteroscopy in the detection of chronic endometritis, based on the association of edema; hyperemia; and, if present, micropolyps were calculated. Based on the presence of hyperemia and edema, chronic endometritis was diagnosed in 158 patients (17.4%); in 61 patients (6.7%), micropolyps also were present. Histology confirmed the diagnosis in 101 patients (63.9% of positive cases at hysteroscopy) and was positive in 9 additional cases not detected by hysteroscopy. The sensitivity, specificity, and positive and negative predictive values of hysteroscopy for chronic endometritis based on detection of only hyperemia and edema were 91.8%, 92.9%, 63.9%, and 98.8%, respectively; the diagnostic accuracy was 92.7 %. The combination of hyperemia, edema, and micropolyps had sensitivity, specificity, and positive and negative predictive values of 55.4%, 99.9%, 98.4%, 94.5%, respectively, with a diagnostic accuracy of 93.4%.

**Conclusions:** Fluid hysteroscopy is very reliable in diagnosing no inflammation, while detection of micropolyps is a very reliable sign of inflammation. When performing hysteroscopy for abnormal uterine bleeding or infertility, signs of chronic endometritis should always be sought.

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